

TRANSMITTAL FORM

Attorney Docket No.

BC9-99-065/1500P

In re the application **Jennie CHING, et al.**
Serial No. **09/524,091**

Confirmation No: **6651**

Group Art Unit: **2611**

Filed: **March 13, 2000**

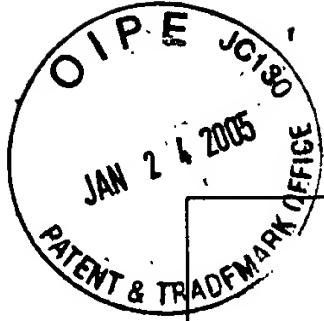
Examiner: **Demicco, Matthew R.**

For: **Method and System for Providing Tunable Parameters to Control Distribution In A Digital Media Distributor**

ENCLOSURES (check all that apply)					
<input checked="" type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Notice of Appeal
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Brief (<i>in triplicate</i>)
<input type="checkbox"/>	Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	(X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer		
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from _____ to _____.			
<input type="checkbox"/>	Executed Declaration by Inventor(s)				

CLAIMS					
FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	20	20	0	\$ 50.00	\$ 0.00
Independent Claims	3	3	0	\$200.00	\$ 0.00
				Total Fees	\$ 0.00
METHOD OF PAYMENT					
<input type="checkbox"/>	Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.				
<input checked="" type="checkbox"/>	Charge any fees or credit any overpayment to Deposit Account No. <u>09-0460</u> (IBM Corporation)				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Attorney Name	Joseph A. Sawyer, Jr., Reg. No. 30,801
Signature	
Date	January 19, 2005
CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 19, 2005.	
Type or printed name	Irena Nikolova
Signature	



BC9-99-065/1500P

2611
JFCERTIFICATE OF MAIL

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on January 19, 2005.

Irena Nikolova

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: January 19, 2005

Jennie CHING, et al.

Confirmation No.: 6651

Serial No.: 09/524,091

Group Art Unit: 2611

Filed: March 13, 2000

Examiner: Demicco, Matthew R.

For: METHOD AND SYSTEM FOR PROVIDING TUNABLE PARAMETERS TO
CONTROL DISTRIBUTION IN A DIGITAL MEDIA DISTRIBUTION

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated October 21, 2004, please amend the above-identified application in the following manner:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.